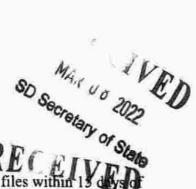


## **Conflict of Interest**

## CANDIDATE

## Statement of Financial Interest



Deadline to file: Within 15 days after filing nominating petitions (Supreme Court Justice files within 13 days of notifying Secretary of State of his intention to place his name on the retention ballot) or certification of convention nomination.

File with: The SECRETARY OF STATE except local candidates file with the office where the period period period of the period of t

Candidates who file: State and Federal Office candidates (United States Senate, United States House of Representatives, Governor, State Legislator, circuit court judge and Supreme Court Justice SDCL 12-25-28);

Convention Nominee candidates (Lieutenant Governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands <u>SDCL 12-25-29</u>);

Convention Nominee candidates of a party with alternative political status (US Senate, US House, Governor, Lieutenant Governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands or state legislator SDCL 12-25-29.1); and

Local Office candidates (county commissioner, school board member in a school district with a total enrollment of more than 2,000 students, or commissioner, council member, or mayor in any 1st class municipality SDCL 12-25-30)

Please print: Full Name Amber Arlint		
COMPLETE Address 8605 S. Regent Park Or Sloux falls, SD 57108		
Office Sought (list District number if applicable) House of Representatives, District 12		
What is your occupation/profession? Insurance Agent		
List any source of funds (business or economic relationship) which contributes more than 10% of or more than \$2,000 to your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. This also includes any enterprise in which you or an immediate family member(s) controls more than 10% of the capital or stock. Identify who receives the income from each enterprise but do not include the value. (SDCL 12-25-27)  *The intent of this form is to collect specific information, not generalities. Do not put N/A or leave the grid blank.		
Name of Candidate or	Name the Source of Funds (Ex: current employer, SD Legislature, 401K,	Relationship to funds (Ex employee, officer, director, associate, partner,
Family Member	benefits, etc.)	shareholder, owner, member, proprietor, etc.)
Amber Arlint	Amber Arlint Insurance and financial Services	Owner/Employee
Trenton Arlint	Stem Oil Ca Inc.	Employee
Trenton Arlint	CoAxis Energy Co	, 0
I declare and affirm under the penalties of perjury that the information above has been examined by me and to the best of my knowledge and belief is a true, correct and complete representation of myself and my immediate family's financial interests for the preceding calendar year.		
my knowledge and belief is a tr	penalties of perjury that the information above ue, correct and complete representation of my	has been examined by me and to the best of
my knowledge and belief is a tr interests for the preceding caler	penalties of perjury that the information above ue, correct and complete representation of my	has been examined by me and to the best of
my knowledge and belief is a tr interests for the preceding caler (Signature)	penalties of perjury that the information above ue, correct and complete representation of my	has been examined by me and to the best of self and my immediate family's financial